

| ISSUE CLASSIFICATION |          |
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| Class                | Subclass |
|                      |          |

PATENT NUMBER

## U.S. UTILITY Patent Application

**O.I.P.E.**

**PATENT DATE**

SCANNED

**Q.A.**

no English Translation

|                              |            |              |                 |                  |                                        |
|------------------------------|------------|--------------|-----------------|------------------|----------------------------------------|
| APPLICATION NO.<br>09/773530 | CONT/PRIOR | CLASS<br>358 | SUBCLASS<br>474 | ART UNIT<br>2622 | EXAMINER<br><del>F. Lee</del> H. GIBBS |
|------------------------------|------------|--------------|-----------------|------------------|----------------------------------------|

TS Kouichi Ando

Scanner unit

**TITLE**

PTO-2040  
12/99

## ISSUING CLASSIFICATION

[illegible]

|                                                                                                                                                                                                                                                                               |                                    |                    |                                   |                     |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|--------------------|-----------------------------------|---------------------|
| <input type="checkbox"/> <b>TERMINAL<br/>DISCLAIMER</b>                                                                                                                                                                                                                       | <b>DRAWINGS</b>                    |                    | <b>CLAIMS ALLOWED</b>             |                     |
|                                                                                                                                                                                                                                                                               | <b>Sheets Drwg.</b>                | <b>Figs. Drwg.</b> | <b>Print Fig.</b>                 | <b>Total Claims</b> |
| <input type="checkbox"/> The term of this patent subsequent to _____ (date) has been disclaimed.                                                                                                                                                                              | _____ (Assistant Examiner)         |                    | <b>NOTICE OF ALLOWANCE MAILED</b> |                     |
|                                                                                                                                                                                                                                                                               |                                    |                    |                                   |                     |
| <input type="checkbox"/> The term of this patent shall not extend beyond the expiration date of U.S Patent No. _____<br><br>_____                                                                                                                                             | _____ (Primary Examiner)           |                    | <b>ISSUE FEE</b>                  |                     |
|                                                                                                                                                                                                                                                                               |                                    |                    | <b>Amount Due</b>                 | <b>Date Paid</b>    |
| <input type="checkbox"/> The terminal ____ months of this patent have been disclaimed.                                                                                                                                                                                        | _____ (Legal Instruments Examiner) |                    | <b>ISSUE BATCH NUMBER</b>         |                     |
|                                                                                                                                                                                                                                                                               |                                    |                    |                                   |                     |
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Form **PTO-436A**  
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